AMENDMENT OF SOLICITATION	ON/MODIFICATION OF CON	ITRACT	CONTRACT ID CODE	PAGE OF PAGES
. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE		SITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)
R-HQ-03-10806/0001			03-10806	
ISSUED BY	CODE	7. ADMIN	STERED BY (If other than item 6) COD	DE
nvironmental Protection Agency	D:L-I: (2000D)			
d and Proposal Room, Ariel Rios	Building (3802R)			
200 Pennsylvania Avenue, N.W.				
Ashington, DC 20460 NAME AND ADDRESS OF CONTRACTOR (No., stree			9A. AMENDMENT OF S	COLICITATION NO
THANK AND ADDRESS OF CONTRACTOR (No., street	t, county, State and ZIP Code)		(✓) 9A. AMENDMENT OF S	OCIOTATION NO.
			PR-HQ-03-1080	
			9B. DATED (SEE ITE <b>06/05/03</b>	M 11)
			11,111,111	I OF CONTRACT/ORDER
			NO.	TO CONTRACT/ORDER
			10B. DATED (SEE ITE	M 42)
DDE FA	ACILITY CODE		IVE. DATED (SEE TE	m 19 j
	11. THIS ITEM ONLY APPLIES TO	AMENDMENTS	OF SOLICITATIONS	
[X] The above numbered solicitation is amended a	as set forth in Item 14. The hour and date	specified for recei	pt of Offers [] is extended, [X] is	s not extended.
fers must acknowledge receipt of this amendment p	· · · · · · · · · · · · · · · · · · ·			
By completing Items 8 and 15, and returning 1				
bmitted; or (c) By separate letter or telegram which ENT TO BE RECEIVED AT THE PLACE DESIGNATE				EDG-
REJECTION OF YOUR OFFER. If by virtue of this a				
ter, provided each telegram or letter makes referen	se to the solicitation and this amendment,	, and is received p	rior to the opening nour and date spe	сттеа.
ACCOUNTING AND APPROPRIATION DATA (Ifrequ	ired)			
13. 7	THIS ITEM APPLIES ONLY TO MOD	IFICATIONS OF	CONTRACTS/ORDERS.	
	T MODIFIES THE CONTRACT/ORD		•	
A. THIS CHANGE ORDER IS ISSUED PUTRACT ORDER NO. IN ITEM 10A	JRSUANT TO: (Specify authority) THE CHANG	GES SET FORTH I	N ITEM 14 ARE MADE IN THE CON-	
	T/ORDER IS MODIFIED TO REFLECT THE TEM 14, PURSUANT TO THE AUTHORITY (		CHANGES (such as changes in paying office	ce,
c. THIS SUPPLEMENTAL AGREEMENT	IS ENTERED INTO PURSUANT TO AUTHO	ORITY OF:		
D. OTHER (Specify type of modification and au	(thority)			
D. OTTLET (opecity type of mountainon and an	anormy)			
IMPORTANT: Contractor [] is not, [] is re	equired to sign this document and return	copies to t	he issuing office.	
. DESCRIPTION OF AMENDMENT/MODIFICATION (	Organized by IICE section headings including solici			
Please see the changes in bold.	ngamzed by oor section nearings, maturing some	reaction/contract subject	maker where reasible.	
J				
except as provided herein, all terms and conditions	of the document referenced in Item 9A or	10A, as heretofore	changed, remains unchanged and ir	n full force
And effect.  A. NAME AND TITLE OF SIGNER (Type or print)		16A. NA	ME AND TITLE OF CONTRACTING OF	FICER (Type or print)
		JENNIF	ER T. JOHNSON	
B. CONTRACTOR/OFFEROR	15C DATE SIGN	NED 16B. UNI	TED STATES OF AMERICA	16C. DATE SIGNE
				_
(Signature of person authorized to sign)			(Signature of Contracting Officer)	
N 7540-01-152-8070 REVIOUS EDITION UNUSABLE		30-105		STANDARD FORM 30 (REV 10-8: Prescribed by GSA
LETTOGO EDITION ONOUABLE				FAR (48 CFR) 52.243

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### AMENDMENTS TO THE SOLICITATION

1. The Section B clause entitled "FIXED PRICES--INDEFINITE DELIVERY/INDEFINITE QUANTITY CONTRACT (EP 52.216-135) (APR 1984)" has been modified. The text is as follows:

The following fixed rates shall apply for payment purposes for the duration of the contract:

BASE Peri Item	od Item Description	Fixed Rate
Prime Cor	ntractor: (To be identified at award)	
0001 0002 0003 0004 0005 0006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Tech. Analyst/Consultant Communications Specialist/Consultant	\$.00* \$.00* \$.00* \$.00* \$.00*
Subcontra	actors: (To be identified at award)	
0001 0002 0003 0004 0005 0006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Tech. Analyst/Consultant Communications Specialist/Consultant SE PERIOD LABOR CEILING:	\$.00* \$.00* \$.00* \$.00* \$.00*
	nserted by the Government at time of award.	
Option Pe	_	Fixed Rate
Prime Cor	ntractor: (To be identified at award)	
1001 1002 1003 1004 1005 1006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Tech. Analyst/Consultant Communications Specialist/Consultant	\$.00* \$.00* \$.00* \$.00* \$.00*
Subcontra	actors: (To be identified at award)	
1001 1002 1003 1004	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant	\$.00* \$.00* \$.00* \$.00*

1005	Scientist/Tech. Analyst/Consultant	\$.00*
1006	Communications Specialist/Consultant	\$.00*

#### TOTAL OPTION PERIOD I LABOR CEILING:

\*To be inserted by the Government at time of award.

Option	Period	ΙI

Item	Item Description	Fixed Rate
Prime Co	ontractor: (To be identified at award)	
2001 2002 2003 2004 2005 2006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Technical Analyst/Consultant Communications Specialist/Consultant reactors (To be identified at award)	\$.00* \$.00* \$.00* \$.00* \$.00*
2001 2002 2003 2004 2005 2006 2007	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Technical Analyst/Consultant Communications Specialist/Consultant Administrative Support	\$.00* \$.00* \$.00* \$.00* \$.00* \$.00*

#### TOTAL OPTION PERIOD II LABOR CEILING:

Except for Other Direct Costs (ODCs) and any G&A/Material Handling costs thereon, the rate, or rates, set forth above cover all expenses, including report preparation, salaries, overhead, general and administrative expenses, and profit.

The Contractor shall voucher for only the time of the personnel whose services are applied directly to the work called for in individual Task Orders and accepted by the Project Officer (PO) or Task Order Project Officer (TOPO). The Government shall pay the Contractor for the life of a Task Order at rates in effect when the Task Order was issued, even if performance under the Task Order crosses into another period. The Contractor shall maintain time and labor distribution records for all employees who work under the contract. These records must document time worked and work performed by each individual on all Task Orders.

<sup>\*</sup>To be inserted by the Government at time of award.

- 2. The Section L clause entitled "SPECIAL TECHNICAL AND COST PROPOSAL INSTRUCTIONS" has been modified. The changed text is as follows:
- (a). Under TAB B: <u>KEY PERSONNEL</u>

Manager(s) who will be primarily responsible for all aspects of the resulting contract. His/Her experience and expertise shall be demonstrated relative to the Statement of Work for this solicitation including his/her role as contributors or prepares of the offeror's technical proposal. Provide the resume(s) and current letter(s) of commitment for proposed key personnel. The resume(s) shall address the qualifications described in the Section L provision entitled "DEFINITION OF LABOR CATEGORIES" and be no longer than three (3) pages long. The letters must be signed by the key personnel as near to the initial closing date of the Request for Proposal (RFP) as practicable (i.e., within the previous two (2) weeks) and must indicate his/her ability to provide the services proposed and the percentage of time available to work on the resulting contract.

- (b). Under TAB J: ORAL PRESENTATION
- (iii). Offeror's Employee Participation. The presentation must be made by one or more of the personnel identified in TAB B above (i.e., Key Personnel). The **key personnel** who will have operational responsibility for contract performance must be present and must answer any clarifications posed by the Government. Offerors may not use company senior or general managers or other employees or consultants to make any part of the oral presentation. The presenters shall use name plates to identify themselves.
- (c). Under (F), Section 2.1 LOADED LABOR RATES, shall include the offeror's proposed loaded rates for the Prime Contractor and its Team Subcontractors.
- (d). Section 2.5 Conflict of Interest Plan. This section shall include the information required by clause M.4, Minimum Standards for EPA Contractor COI Plans.
- (e) Under Additional Cost Proposal Instructions
  - (4) Other Direct Costs (ODC).
    - (i) The ceilings shown in Section L is inclusive of all Other Direct Costs; however, it is exclusive of any applicable indirect loadings. Offerors may propose applicable indirect loadings consistent with their approved accounting policies and procedures.

3. (b) Distribution of level of effort. Submit your proposal utilizing the labor categories shown below:

BASE Period: <u>02/19/04 - 02/18/06</u>

BASE Per Item	iod  Item Description	Proposal Prep. Hours	Fixed Rate
Prime Co	ntractor: (To Be Identified at Award)		
0001 0002 0003 0004 0005 0006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Tech. Analyst/Consultant Communications Specialist/Consultant	52,000 23,400 10,400 20,000 20,000 20,000	\$.00 \$.00* \$.00* \$.00* \$.00*
Subcontr	actor(s): (To Be Identified at Award)		
0001 0002 0003 0004 0005 0006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Tech. Analyst/Consultant Communications Specialist/Consultant	52,000 23,400 10,400 20,000 20,000 20,000	\$.00 \$.00* \$.00* \$.00* \$.00*

### TOTAL BASE PERIOD LABOR CEILING:

Option Period I: 02/19/06 - 02/18/08

Option P Item	eriod I Item Description	Proposal Prep. Hours	Fixed Rate
Prime Co	ntractor: (To Be Identified at Award)		
1001 1002 1003 1004 1005 1006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Tech. Analyst/Consultant Communications Specialist/Consultant	10,400 20,000 20,000	\$.00* \$.00* \$.00* \$.00* \$.00*
Subcontr	actor(s): (To Be Identified at Award)		
1001 1002 1003	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1)	52,000 23,400 10,400	\$.00* \$.00* \$.00*

1004	Sr. Scientist/Expert/Consultant	20,000	\$.00*
1005	Scientist/Tech. Analyst/Consultant	20,000	\$.00*
1006	Communications Specialist/Consultant	20,000	\$.00*

## TOTAL OPTION PERIOD I LABOR CEILING:

Option Period II: 02/19/08 - 02/18/09

Option P	eriod II	Proposal Prep.	
Item	Item Description	Hours	Fixed Rate
Prime Co	ntractor: (To Be Identified at Award)		
2001 2002 2003 2004 2005 2006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Technical Analyst/Consultant Communications Specialist/Consultant	28,000 12,600 5,600 10,000 t 10,000 10,000	\$.00* \$.00* \$.00* \$.00* \$.00*
Subcontr	actor(s): (To Be Identified at Award)		
2001 2002 2003 2004 2005 2006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Technical Analyst/Consultant Communications Specialist/Consultant	28,000 12,600 5,600 10,000 10,000	\$.00* \$.00* \$.00* \$.00* \$.00*

# TOTAL OPTION PERIOD II LABOR CEILING:

# Total Option Period II Direct Labor:

Period: 02/19/04 - 02/18/09

Item	Item Description	Proposal Prep. Hours	
Prime Co	ntractor: (To Be Identified at Award)		
3001 3002 3003 3004 3005 3006	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1) Sr. Scientist/Expert/Consultant Scientist/Tech. Analyst/Consultant Communications Specialist/Consultant	132,000 59,400 26,400 50,000 50,000	\$.00* \$.00* \$.00* \$.00* \$.00*
Subcontr	actor(s): (To Be Identified at Award)		
3001 3002 3003	Dispute Resolution Prof. (Level 3) Dispute Resolution Prof. (Level 2) Dispute Resolution Prof. (Level 1)	132,000 59,400 26,400	\$.00* \$.00* \$.00*

3004	<pre>Sr. Scientist/Expert/Consultant</pre>	50,000	\$.00*
3005	Scientist/Tech. Analyst/Consultant	50,000	\$.00*
3006	Communications Specialist/Consultant	50,000	\$.00*

TOTAL DIRECT LABOR CEILING:

\*To be inserted by the Government at time of award.

## 6. Key Personnel

Offeror's Key Personnel will be evaluated based upon the requirements of the labor category for Sr. Contract Administrator(s)/Program Manager(s) in the Statement of Work, i.e., his/her demonstrated skills, training, knowledge and experience in two areas: (1) negotiation, facilitation, mediation, public involvement and other ADR processes; (2) management of a nationwide contract consisting of at least 20 tasking documents, (3) management and reporting structure for the Sr. Contract Administrator(s)/Program Manager(s).

# COST PROPOSAL FORMAT - BASE PERIOD

	000	1	000	0002 0003		0004		0005		0006		Tot	al	
Prof DL Hrs														
Prof DL Rate														
Prof DL \$														
Support DL\$*														
Total DL\$														
Fringe	%	\$	olo	\$	90	\$	90	\$	90	\$	0/0	\$		
Overhead	00	\$	olo	\$	양	\$	olo	\$	90	\$	0/0	\$		
Subtotal														
G&A	olo	\$	્ર	\$	00	\$	oko	\$	0/0	\$	90	\$		
Material Handling	olo	\$	olo	\$	oko	\$	oko	\$	90	\$	90	\$		
Total Cost														
Profit	%	\$	olo	\$	%	\$	ક	\$	olo	\$	90	\$		
Total Price		I												
Total price/Prof DL hours = Fixed Rate														
ODCs	N/A		N/A		N/A		N/A		N/A	7	N/A			\$7,000.000
Indirect Loading on ODCs	N/A		N/A		N/A		N/A	N/A		N/A			%	\$
Grand Total	N/A		N/A		N/A		N/A		N/A	7	N/A	<b>.</b>		1

\*Show separate schedule detailing the costs for this element, including hours and direct labor rate by category. Includes program management, contract administration and administrative support.

## COST PROPOSAL FORMAT - OPTION PERIOD I

	0001		0002		0003		0004		0005		0006		Total	
Prof DL Hrs														
Prof DL Rate														
Prof DL \$														
Support DL\$*														
Total DL\$														
Fringe	િ	\$	010	\$	0/0	\$	90	\$	90	\$	010	\$		
Overhead	00	\$	010	\$	90	\$	%	\$	%	\$	90	\$		
Subtotal														
G & A	્	\$	%	\$	oko	\$	oko	\$	0/0	\$	90	\$		
Material Handling	olo	\$	olo	\$	્	\$	્	\$	olo	\$	00	\$		
Total Cost														
Profit	olo	\$	90	\$	oko	\$	oko	\$	olo	\$	90	\$		
Total Price	<u> </u>													
Total price/Prof DL hours = Fixed Rate														
ODCs	N/A		N/A		N/A		N/A		N/A		N/A			\$8,000.000
Indirect Loading on ODCs	N/A		N/A		N/A		N/A		N/A		N/A		90	\$
Grand Total	N/A		N/A		N/A		N/A		N/A		N/A			1

<sup>\*</sup>Show separate schedule detailing the costs for this element, including hours and direct labor rate by category. Includes program management, contract administration and administrative support.

## COST PROPOSAL FORMAT - OPTION PERIOD II

	000	)1	00	02	000	03	000	0.4	0.0	05	00	06	Tot	cal
Prof DL Hrs														
Prof DL Rate														
Prof DL \$														
Support DL\$*														
Total DL\$														
Fringe	00	\$	0/0	\$	양	\$	양	\$	90	\$	0/0	\$		
Overhead	%	\$	00	\$	90	\$	90	\$	90	\$	%	\$		
Subtotal														
G&A	olo	\$	olo	\$	olo	\$	oko	\$	qlo	\$	olo	\$		
Material Handling	00	\$	oļo	\$	00	\$	જ	ş	oko	\$	olo	\$		
Total Cost														
Profit	0/0	ş	olo	\$	%	\$	96	\$	olo	\$	olo	\$		
Total Price														
Total price/Prof DL hours = Fixed Rate														
ODCs	N/A		N/A		N/A		N/A		N/A		N/A			\$4,300.000
Indirect Loading on ODCs	N/A		N/A		N/A		N/A		N/A		N/A		જ	\$
Grand Total	N/A		N/A		N/A		N/A		N/A		N/A			I

<sup>\*</sup>Show separate schedule detailing the costs for this element, including hours and direct labor rate by category. Includes program management, contract administration and administrative support.

## COST PROPOSAL FORMAT - GRAND TOTAL - ALL PERIODS

	0001 00		00	0002		0003		0004		0005		0006		Total	
Prof DL Hrs															
Prof DL Rate															
Prof DL \$															
Support DL\$*															
Total DL\$															
Fringe	%	\$	olo	\$	%	\$	용	\$	90	\$	0/0	\$			
Overhead	0/0	\$	00	\$	olo	\$	%	\$	90	\$	%	\$			
Subtotal															
G&A	%	\$	8	\$	୧	\$	90	\$	0/0	\$	olo	\$			
Material Handling	olo	Ş	olo	\$	જ	\$	90	\$	olo	\$	90	\$			
Total Cost															
Profit	%	\$	%	\$	90	Ş	%	\$	୧	\$	%	\$			
Total Price															
Total price/Prof DL hours = Fixed Rate															
ODCs	N/A		N/A		N/A		N/A		N/A		N/A		Ş	19,300.000	
Indirect Loading on ODCs	N/A		N/A		N/A		N/A		N/A		N/A		%	\$	
Grand Total	N/A		N/A		N/A		N/A		N/A		N/A				

<sup>\*</sup>Show separate schedule detailing the costs for this element, including hours and direct labor rate by category. Includes program management, contract administration and administrative support.

6. The attachment entitled "INVOICE PREPARATION INSTRUCTIONS" has been modified. The text is as follows:

#### Revised 07/16/03

#### INVOICE PREPARATION INSTRUCTIONS

#### SF 1034

The information which a contractor is required to submit in its Standard Form 1034 is set forth as follows:

- (1) **U.S. Department, Bureau, or establishment and location** insert the names and address of the servicing finance office unless the contract specifically provides otherwise.
- (2) **Date Voucher Prepared** insert date on which the public voucher is prepared and submitted.
- (3) **Contract/Delivery Order Number and Date** insert the number and date of the contract and delivery order, if applicable, under which reimbursement is claimed.
- (4) **Requisition Number and Date** leave blank.
- Voucher Number insert the appropriate serial number of the voucher. A separate series of consecutive numbers, beginning with Number 1, shall be used by the contractor for each new contract. When an original voucher was submitted, but not paid in full because of suspended costs, resubmission vouchers should be submitted in a separate invoice showing the original voucher number and designated with the letter "R" as the last character of the number. If there is more than one resubmission, use the appropriate suffix (R2, R3, etc.)
- (6) Schedule Number; Paid By; Date Invoice Received leave blank.
- (7) **Discount Terms** enter terms of discount, if applicable.
- (8) **Payee's Account Number** this space may be used by the contractor to record the account or job number(s) assigned to the contract or may be left blank.
- (9) **Payee's Name and Address** show the name of the contractor exactly as it appears in the contract and its correct address, except when an assignment has been made by the contractor, or the right to receive payment has been restricted, as in the case of an advance account. When the right to receive payment is restricted, the type of information to be shown in this space shall be furnished by the Contracting Officer.
- (10) Shipped From; To; Weight Government B/L Number insert for supply contracts.
- (11) **Date of Delivery or Service** show the month, day and year, beginning and ending dates of incurrence of costs claimed for reimbursement. Adjustments to costs for prior periods should identify the period applicable to their incurrence, e.g., revised provisional or final indirect cost rates, award fee, etc.
- Articles and Services insert the following: "For detail, see Standard Form 1035 total amount claimed transferred from Page of Standard Form 1035." Type "COST REIMBURSABLE-PROVISIONAL PAYMENT" or "INDEFINITE QUANTITY/INDEFINITE DELIVERY-PROVISIONAL PAYMENT" on the Interim public vouchers. Type "COST REIMBURSABLE-COMPLETION VOUCHER" or "INDEFINITE QUANTITY/INDEFINITE DELIVERY-COMPLETION VOUCHER" on the Completion public voucher. Type "COST REIMBURSABLE-FINAL VOUCHER" or "INDEFINITE QUANTITY/INDEFINITE DELIVERY-FINAL VOUCHER" on the Final public voucher. Type the following certification, signed by an authorized official, on the face of the Standard Form 1034.

"I certify that all payments requested are for appropriate purposes and in accordance with the agreements set forth in the contract."

(Name of Official)	(Title)	

- (13) **Quantity; Unit Price** insert for supply contracts.
- (14) **Amount** insert the amount claimed for the period indicated in (11) above.

### INVOICE PREPARATION INSTRUCTIONS SF 1035

The information which a contractor is required to submit in its Standard Form 1035 is set forth as follows:

- (1) U.S. Department, Bureau, or Establishment insert the name and address of the servicing finance office.
- (2) **Voucher Number** insert the voucher number as shown on the Standard Form 1034.
- (3) **Schedule Number** leave blank.
- (4) **Sheet Number** insert the sheet number if more than one sheet is used in numerical sequence. Use as many sheets as necessary to show the information required.
- (5) **Number and Date of Order** insert payee's name and address as in the Standard Form 1034.
- (6) Articles or Services insert the contract number as in the Standard Form 1034.
- (7) **Amount** insert the latest estimated cost, fee (fixed, base, or award, as applicable), total contract value, and amount and type of fee payable (as applicable).
- (8) A summary of claimed current and cumulative costs and fee by major cost element. Include the rate(s) at which indirect costs are claimed and indicate the base of each by identifying the line of costs to which each is applied. The rates invoiced should be as specified in the contract or by a rate agreement negotiated by EPA's Cost Policy and Rate Negotiation Branch.
- (9) The **fee** shall be determined in accordance with instructions appearing in the contract.

NOTE: Amounts claimed on vouchers must be based on records maintained by the contractor to show by major cost element the amounts claimed for reimbursement for each applicable contract. The records must be maintained based on the contractor's fiscal year and should include reconciliations of any differences between the costs incurred per books and amounts claimed for reimbursement. A memorandum record reconciling the total indirect cost(s) claimed should also be maintained.

### SUPPORTING SCHEDULES FOR COST REIMBURSEMENT CONTRACTS

The following backup information is required as an attachment to the invoice as shown by category of cost:

**Direct Labor** - identify the number of hours (by contractor labor category and total) and the total direct labor dollars billed for the period in the invoice.

**Indirect Cost Rates** - identify by cost center, the indirect cost rate, the period, and the cost base to which it is applied.

**Subcontracts** - identify the major cost elements for each subcontract.

**Other Direct Costs** - when the cost for an individual cost (e.g., photocopying, material and supplies, telephone usage) exceeds \$1,000 per the invoice period, provide a detailed explanation for that cost category.

Contractor Acquired Equipment (if authorized by the contract) - identify by item the quantities, unit prices, and total dollars billed.

Contractor Acquired Software (if authorized by the contract) - identify by item the quantities, unit prices, and total dollars billed.

**Travel** - when travel costs exceed \$2,000 per invoice period, identify by trip, the number of travelers, the duration of travel, the point of origin, destination, purpose of trip, transportation by unit price, per diem rates on daily basis and total dollars billed. Detailed reporting is not required for local travel.

The manner of breakdown, e.g., work assignment/delivery order basis with/without separate program management, contract period will be specified in the contract instructions.

NOTE: Any costs requiring advance consent by the Contracting Officer will be considered improper and will be suspended, if claimed prior to receipt of Contracting Officer consent. Include the total cost claimed for the current and cumulative-to-date periods. After the total amount claimed, provide summary dollar amounts of cumulative costs: (1) suspended as of the date of the invoice; and (2) disallowed on the contract as of the date of the invoice. The amount under (2) shall include costs originally suspended and later disallowed. Also include an explanation of the changes in cumulative costs suspended or disallowed by addressing each adjustment in terms of: voucher number, date, dollar amount, source, and reason for the adjustment. Disallowed costs should be identified in unallowable accounts in the contractor's accounting system.

### SUPPORTING SCHEDULES FOR FIXED-RATE CONTRACTS

The following backup information is required as an attachment to the invoice as shown by category of cost:

**Direct Labor** - identify by labor category the number of hours, fixed hourly rate, and the total dollars billed for the period of the invoice.

**Subcontracts** - identify the major cost elements for each subcontract.

**Other Direct Costs** - when the cost for an individual cost (e.g., photocopying, material and supplies, telephone usage) exceeds \$1,000 per the invoice period, provide a detailed explanation for that cost category.

**Indirect Cost Rates** - identify by cost center, the indirect cost rate, the period, and the cost base to which it is applied.

Contractor Acquired Equipment - identify by item the quantities, unit prices, and total dollars billed.

Contractor Acquired Software - identify by item the quantities, unit prices, and total dollars billed.

**Travel** - when travel costs exceed \$2,000 per invoice period, identify by trip, the number of travelers, the duration of travel, the point of origin, destination, purpose of trip, transportation by unit price, per diem rates on daily basis and total dollars billed. Detailed reporting is not required for local travel.

The manner of breakdown, e.g., work assignment/delivery order basis with/without separate program management, contract period will be specified in the contract instructions.

NOTE: Any costs requiring advance consent by the Contractor Officer will be considered improper and will be suspended, if claimed prior to receipt of Contracting Officer consent. Include the total cost claimed for the current and cumulative-to-date periods. After the total

amount claimed, provide summary dollar amounts of cumulative costs: (1) suspended as of the date of the invoice; and (2) disallowed on the contract as of the date of the invoice. The amount under (2) shall include costs originally suspended and later disallowed. Also include an explanation of the changes in cumulative costs suspended or disallowed by addressing each adjustment in terms of: voucher number, date, dollar amount, source, and reason for the adjustment. Disallowed costs should be identified in unallowable accounts in the contractor's accounting system.

#### RESUBMISSIONS

When an original voucher was submitted, but not paid in full because of suspended costs and after receipt of a letter of removal of suspension, resubmissions of any previously claimed amounts which were suspended should be submitted in a separate invoice showing the original voucher number and designated with the letter "R" with the copy of the removal of suspension notice. The amounts should be shown under the appropriate cost category and include all appropriate supplemental schedules. NOTE: All disallowances must be identified as such in the accounting system through journal entries.

Voucher resubmittals may also occur as a result of: (1) a new indirect cost rate agreement; or (2) adjustments to previously billed direct cost rates due to audit resolution. Such claims should be submitted in a separate invoice or request for contractor financing payment number. They should include supplemental schedules showing the previously adjusted amounts by contract period. If the resubmission is based on a new rate agreement, a copy of the agreement should be attached. Costs must be identified by delivery order or work assignment where appropriate. If the contract is Superfund-related, voucher resubmittals shall also identify the amount claimed against each Superfund site and non-site-specific activity.

## **COMPLETION VOUCHERS**

Submit a completion voucher when all performance provisions of the contract are physically complete, when the final report (if required) is accepted, and when all direct costs have been incurred and booked. Indirect costs may be claimed at the provisional rates, if final rates are not yet available. Contractors must identify these vouchers by typing "Completion Voucher" next to the voucher number. For contracts separately invoiced by delivery order, provide a schedule showing total costs claimed by delivery order and in total for the contract.

In addition to the completion voucher, the contractor must submit an original and two copies of EPA Form 1900-10, Contractor's Cumulative Claim and Reconciliation showing the total cumulative costs claimed under the contract.

The information which a contractor is required to submit in its EPA Form 1900-10 is set forth as follows:

- (1) **Contractor's Name and Address** show the name of the contractor exactly as it appears in the contract and its correct address, except when an assignment has been made by the contractor, or the right to receive payment has been restricted, as in the case of an advance account. When the right to receive payment is restricted, the type of information to be shown in this space shall be furnished by the Contracting Officer.
- (2) **Contract Number** insert the number of the contract under which reimbursement is claimed.
- (3) First voucher number and completion voucher number.
- (4) Total amount of cost claimed for each cost element category through the completion voucher.
- (5) Total Fee awarded.
- (6) Amount of indirect costs calculated using negotiated final indirect cost rate(s) and/or provisional rate(s) as specified in the contract, if final rate(s) are not yet negotiated for any fiscal period.

- (7) Fiscal year.
- (8) Indirect cost center.
- (9) Appropriate basis for allocation.
- (10) Negotiated final indirect cost rate(s) or provisional indirect cost rate(s).
- (11) Signature.
- (12) Official title.
- (13) Date.

### FINAL VOUCHER AND CLOSING DOCUMENTS

After completion of the final audit and all suspensions and/or audit exceptions have been resolved as to the final allowable costs and fee, including establishment of final indirect cost rate(s) for all periods the contractor shall prepare a final voucher including any adjustments to vouchered costs necessitated by the final settlement of the contract price. Contractors must identify these vouchers by typing "Final Voucher" next to the voucher number. For contracts separately invoiced by delivery order, provide a schedule showing final total costs claimed by delivery order and in total for the contract. The contractor shall also provide an original and two copies of an updated EPA Form 1900-10, Contractors Cumulative Claim and Reconciliation, showing the total negotiated, cumulative costs for the contract. Indirect costs shall be included at the final negotiated rates.

In addition to the final voucher, the contractor must submit an original and two copies of the Contractor's Release; Assignee's Release, if applicable; the Contractor's Assignment of Refunds, Rebates, Credits and other Amounts; the Assignee's Assignment of Refunds, Rebates, Credits and other Amounts, if applicable; and the Contractor's Affidavit of Waiver of Lien, when required by the contract.